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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : GARTNER BROCK & SIMON

Account Number : 119990000204

Fax Number

Email Address: <u>fazizi@qmail.com</u>

Phone : (904)399-0870 : (904)399-1113

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

FLORIDA LIMITED LIABILITY CO.

Azizi Family, LLC

Certificate of Status	1
Certified Copy	0
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J. HARRIS

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

GARTNER BROCK & SIMON

SUBJECT: AZIZI FAMILY, LLC

REF: W14000075470

December 19, 2014

2015 JAN -9 AH 8: 20
SECRETARY OF STATE
TAIL AHASSEE, FLORIDA

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick Regulatory Specialist II FAX Aud. #: H14000292417 Letter Number: 814A00026878

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P.O BOX 6327 - Tailahassee, Florida 32314

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ARTICLES OF ORGANIZATION OF AZIZI FAMILY, LLC

The undersigned, desiring to form a limited liability company under and pursuant to the Florida Limited Liability Company Act. Chapter 605, Florida Statutes, does hereby adopt the following Articles of Organization.

ARTICLE I NAME

The name of the Limited Liability Company shall be Azizi Family, LLC.

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: 5 Moses Crescent, Markham, ON L6C 1R2, Canada.

ARTICLE III PURPOSE

The purpose for which the Company is being formed is to engage in any activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV DURATION

The period of duration for the Limited Liability Company shall commence on filing of these Articles with the Florida Secretary of State, and shall continue perpetually, unless terminated: (i) in accordance with the Company's Operating Agreement or (ii) by the unanimous written agreement of all Members.

ARTICLE V MANAGEMENT

The Company shall be conducted, carried on, and managed by no fewer than one (1) Manager, who shall be elected annually by the Members of the Company in the manner prescribed by and provided in the Operating Agreement of the Company. Such Manager shall also have the rights and responsibilities described in the Operating Agreement of the Company. The name and address of the initial Manager is as follows:

Fereydoon Azizi 5 Moscs Crescent Markham, ON L6C 1R2 Canada

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Such Manager shall serve in such capacity until the first annual meeting of the Members or until their successors are duly elected and qualified.

ARTICLE VI ADMISSION OF ADDITIONAL MEMBERS

Additional Members may be admitted upon the approval of a majority of the Members of the Company, upon the written application of such new Member, in the manner set forth in the Operating Agreement of the Company.

ARTICLE VII ADOPTION OF OPERATING AGREEMENT

The Company shall adopt an Operating Agreement for the Company, which Operating Agreement may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with these Articles of Organization or Chapter 605, Fla. Stat.

ARTICLE VIII REGISTERED AGENT AND OFFICE

The Company designates 2804 St. Johns Bluff Rd. S., Suite 200, Jacksonville, Florida 32246, as the street address of the initial registered office of the Company and names Safa M. Mansouri, as the Company's initial registered agent at that address to accept service of process within this State.

ARTICLE IX CONTINUATION OF BUSINESS

Unless dissolved in accordance with the Company's Operating Agreement, the remaining Members shall continue the business of the Company, which shall not be dissolved, upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a Member or the occurrence of any other event which terminates the continued membership of a Member.

IN WITNESS WHEREOF, the undersigned has hereunto set hand and seal the 974 day of January, 2015.

Ferendoon Azizi Authorized Representative

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 605, Florida Statutes, Azizi Family, LLC, submits the following statement in designating the registered office/registered agent, in the State of Florida:

- 1. The name of the limited liability company is: Azizi Family, LLC
- 2. The name and office address of the registered agent is:

Safa M. Mansouri 2804 St. Johns Bluff Rd. S., Suite 200 Jacksonville, Florida 32246

Having been named as registered agent and to accept service of process for the abovestated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Dated the 4th day of January, 2015.

Safa M. Mansouri

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SECRETARY OF STATE
TALLAHASSEF, FI ORIO

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